#### Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 1 of 42

Fill in this information to identify your case:		
United States Bankruptcy Court for the:	•	
NORTHERN DISTRICT OF ILLINOIS		
Case number (it known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

#### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued	Martha First name	First name
	picture identification (for example, your driver's	riist ilanie	Tiochane
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Kugelberg Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	Martha L. Hammes	
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security		
	number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4055	

# Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 2 of 42

About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
Business name(s)	Business name(s)			
EINs	EINs			
	If Debtor 2 lives at a different address:			
4512 Hunt Club Ct. Oswego, IL 60543 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
<b>Kendali</b> County	County			
If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill in here. Note that the court will send any notices to this mailing address.			
Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
Check one:	Check one:			
Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	<ul> <li>Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> </ul>			
I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			
40 N PC Mar 0 1	Business name(s)  3512 Hunt Club Ct. Dswego, IL 60543 Number, Street, City, State & ZIP Code  Kendall County  f your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code  Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			

## Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 3 of 42

Deb	tor 1 Martha Kugelberg				Case numbe	f (if known)	
Pari	2: Tell the Court About	/our Bankı	untev Cas	e			
7.	The chapter of the Check one. (Form 2010)).			a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy so, go to the top of page 1 and check the appropriate box.			
	choosing to file under	■ Chapte	er 7				
		☐ Chapte	er 11				
		☐ Chapte					
		☐ Chapt					
8.	How you will pay the fee	abo orde a pi	et how you er. If your a re-printed a	may pay. Typically, if you are pa ttorney is submitting your payme ddress.	ying the fee yourself, you m nt on your behalf, your attor	ork's office in your local court for more details hay pay with cash, cashier's check, or money may pay with a credit card or check with	
		☐ Ine	ed to pay Filing Fee	in Installments (Official Form 10	BA).	attach the Application for marriadata to 1 dy	
		but apr	is not requ	ired to waive your fee, and may	do so only if your income is o pay the fee in installments	are filing for Chapter 7. By law, a judge may, less than 150% of the official poverty line that s). If you choose this option, you must fill out BB) and file it with your petition.	
 9.	Have you filed for						
	bankruptcy within the last 8 years?	□ Yes.					
	last o yours.	103.	District	W	nen	Case number	
			District		nen	Case number	
			District	w	nen	Case number	
10.	Are any bankruptcy						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District	W	hen	Case number, if known	
			Debtor			Relationship to you	
			District		hen	Case number, if known	
11.	Do you rent your		Go to li	ne 12.			
	residence?	☐ Yes.	Has yo	ur landlord obtained an eviction j	idgment against you and do	you want to stay in your residence?	
				No. Go to line 12.			
				Yes. Fill out <i>Initial Statement Ab</i> bankruptcy petition.	out an Eviction Judgment A	gainst You (Form 101A) and file it with this	

### Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 4 of 42

Deb	tor 1	Martha Kugelberg			Case number (if known)
Par	3: R	eport About Any Bu	sinesses '	You Own as a Sole Propri	ietor
		u a sole proprietor			
12.		full- or part-time	■ No.	Go to Part 4.	
			☐ Yes.	Name and location of b	usiness
	busines an indi separa as a co	proprietorship is a ss you operate as vidual, and is not a te legal entity such rporation, ship, or LLC.		Name of business, if an	
	sole pr	have more than one oprietorship, use a		Number, Street, City, S	tate & ZIP Code
		te sheet and attach spetition.		Check the appropriate	box to describe your business:
		•		☐ Health Care Bu	siness (as defined in 11 U.S.C. § 101(27A))
				☐ Single Asset Re	eal Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as	defined in 11 U.S.C. § 101(53A))
				☐ Commodity Bro	ker (as defined in 11 U.S.C. § 101(6))
				☐ None of the about	ove
13.	Chapte Bankr	small business	deadline: operation	s. If you indicate that you and some statement, and S.C. 1116(1)(B).	ne court must know whether you are a small business debtor so that it can set appropriate re a small business debtor, you must attach your most recent balance sheet, statement of d federal income tax return or if any of these documents do not exist, follow the procedure
	For a c	lefinition of small	No.	I am not filing under Ch	apter 11.
	busine	ss debtor, see 11 § 101(51D).	□ No.	I am filing under Chapt Code.	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
				I am filing under Chapt	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: R	eport if You Own or	Have Any	y Hazardous Property or /	Any Property That Needs Immediate Attention
14.	Do yo	u own or have any	■ No.		
	allege of imn	rty that poses or is d to pose a threat ninent and liable hazard to	☐ Yes.	What is the hazard?	
	public Or do prope	health or safety? you own any rty that needs diate attention?		If immediate attention is needed, why is it needed	?
	For ex perish livesto or a bu	ample, do you own able goods, or ck that must be fed, uilding that needs repairs?		Where is the property?	
					Number, Street, City, State & Zip Code

#### Entered 08/30/16 22:48:07 Case 16-27892 Doc 1 Filed 08/30/16 Desc Main Document Page 5 of 42

Deb	tor 1 Martha Kugelberg					Case number (if known)	
Par	5 Explain Your Efforts to	o Re	ceive a Briefing About Credit Counseling				
			out Debtor 1:	 Al	bo	ut Debtor 2 (Spouse Only in a Joint Case):	
4-	T-11 45		ı must check one:			must check one:	
15.	Tell the court whether you have received a briefing about credit counseling.	100	I received a briefing from an approved cred counseling agency within the 180 days bef filed this bankruptcy petition, and I receive certificate of completion.	lit 🗆		I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.	
	The law requires that you receive a briefing about credit counseling before		Attach a copy of the certificate and the payme plan, if any, that you developed with the agent	nt Cy.		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.	
	you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to		I received a briefing from an approved crec counseling agency within the 180 days bef filed this bankruptcy petition, but I do not to a certificate of completion.	ore I	]	I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.	
	file.  If you file anyway, the court can dismiss your case, you		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificat payment plan, if any.	e and		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.	
	will lose whatever filing fee you paid, and your creditors can begin collection activities again.		I certify that I asked for credit counseling services from an approved agency, but wa unable to obtain those services during the days after I made my request, and exigent circumstances merit a 30-day temporary w of the requirement.	7	]	I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.	
			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaini what efforts you made to obtain the briefing, you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances	vhy		To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.	
				required you to file this case.  Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you			Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.
					must i file. n you		If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.
			developed, if any, if you do not do so, your camay be dismissed.			Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.	
			Any extension of the 30-day deadline is grant only for cause and is limited to a maximum or days.	f 15			
			I am not required to receive a briefing abo credit counseling because of:	ut L		I am not required to receive a briefing about credit counseling because of:	
			Incapacity. I have a mental illness or a mental defit that makes me incapable of realizing of making rational decisions about finance	r		Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	
			Disability. My physical disability causes me to be unable to participate in a briefing in pe by phone, or through the internet, ever reasonably tried to do so.	rson,		Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	
			Active duty. I am currently on active military duty in military combat zone.	a		<ul> <li>Active duty.</li> <li>I am currently on active military duty in a military combat zone.</li> </ul>	
			If you believe you are not required to receive briefing about credit counseling, you must file motion for waiver credit counseling with the or	e a		If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.	

# Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 6 of 42

Deci	ក ( - វិស្សិក្សា <mark>ន កិ</mark> ងស្ពួលសម				Case nome	Mariana de la composición dela composición de la composición de la composición dela composición dela composición dela composición de la composición dela composición de la composición dela composición dela compo			
Park	<b>C</b> Angwar Ybrse 2000		e garaga						
Section 2	What kied of bebts ov You have?			पुरुषक्षात्र । जनसङ्ख्या । १९५१ मध्य १ - जनसङ्ख्या ।	ন্দের লোক ক্রিটের জ্বার কর্নে জ্বোকার হার অবজ্ঞ	1965 in 1980 \$ 1010	3) as "incurred by an		
		*	A in solar depth green at B, both edge, depth 3. Suresta bedre are betts that you incurred to both in The purpose and a consequency of the appropriate appropriate but needs on experiment.						
		1.5	posterior de 1830						
			zwiata z mening						
		nde Sum	176 A CA 31 (22) A 3	0.0049794049733399	\$ , 456 ° 56 ° 58 ° 51 ° 51 68 ° 56	*\$\$ Jett\$			
17	Are you filing under Chapter 17	₩S 3"	sant ing Line Ch	acte 1 Banzone 18					
	Do you estimate that after any exempt property is excluded and	<b>8</b> 5∉8 3 ** 3 ** 3 ** 3 ** 3 ** 3 ** 3 ** 3	ning urber drises sae machiros er il	n i Do vou estimate th. So available to a scribite	st arternamy exempet pro Hounsectived predicor	roerty is excluded and ar sin	dministrative expenses		
	administrative expenses	<b>8</b> <	3						
	are paid that funds will be available for		₹5						
	distribution to unsecured preditors?								
18	How many Creditors do	<b>8</b> - 2 - 2				€ 25,001-58.00	30		
	you estimate that you owe?	<u>□</u> 80-89		2800		□ 50 001-100.0			
		□ 100-88 □ 100-88		I 10 30 %		□ More than 10	id, tide		
19.	How much do you	II \$0 - \$60 €.	N.		ing significant and significan	© \$500,000 a0	11 - \$1 bilkon		
	estimate your assets to be worth?	□ \$50 00°			10 - 582 m - 67		001 - \$10 billion		
		□ \$500 M ( )			101 × 8100 m (191 100 × 8600 m× 106	□ \$10,000,000 □ More man \$	1 001 - \$50 billion 50 billion		
20	How much do you	<b>□ 30 - 3</b> 60 0	DC .	1.3 1.X	den i Bromska	 □ \$500,000,00	 31 - \$1 billion		
	estimate your liabilities to be?	□ \$80 X3.		2 31273	] 001 - <b>8</b> 50 m - 5 m	□ \$1,000,000	.001 - \$10 billion		
		■ \$100 001 □ \$800 001		ച \$60 00 20 \$60 0	0.001 - \$1.00 m 165 20.001 - \$5.00 m/25h	□ \$19,000,00 □ More than:	0.001 - \$50 billion 550 billion		
		***********		, , , , ,			Contract Contract		
Pa	rt 7: Sign Below								
Fo	гуои	I bave examp	neo tris petition ia-	o i dedare under behar	sy of peguny that the in	formation provided is tru	e and correct		
		Rinave chosen to Rejumber Chapter Tilliam aware that Emay proceed of eligible under Chapter Til 11,12, or 13 of title 11. United Stares Code in understand the rener axaliable under each chapter, and Echoose to proceed under Chapter 7.							
		If no attorney recresents melang tipic not pay or agree to pay someone who is not an attorney to help melfill out this opportent. I have obtained and read the horizer required by 11 U.S.C. § 340(b).							
		Frequestire re	et in appointance wi	in the chapter by the in-	Unked States Code	specified in this patition			
		l understand bankruptoy o and 3800	Eunoperata to making a false statement, concessing property, or obtaining money or property by fraud in connection with a bankriticity, case can result in fines up to \$250,000 or impreconment for up to 20 years, or both, 18 U.S.C. §§ 152, 1341, 1519, and 350.1						
		Martha Ku Signature di	JUN IV		Signature of De	epter 2			
		<b>ව්</b> .මේරයේෂ්ආ දර	\$ 120 pm	i.	Executed on	MM / DD / YVYY			

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

page 6

Case 16-27892 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Doc 1 Page 7 of 42 Document Debtor 1 Martha Kugelberg Case number (if known) For your attorney, if you are I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed represented by one under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) If you are not represented by and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the an attorney, you do not need schedules filed with the petition is incorrect. to file this page. Date Signature of Attorney for Debtor John Graf Printed name Law Office of John Graf Firm name 175 E. Hawthorn Parkway Suite 158 Vernon Hills, IL 60061 Number, Street, City, State & ZIP Code

Email address

Contact phone 847-996-1180

Bar number & State

attorneyjohngraf@gmail.com

Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main

Fill	in this information to identify your case:		
Deb	otor 1 Martha Kugelberg First Name Middle Name Last Name		
	otor 2 use if, filing) First Name Middle Name Last Name		
	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		
	se number iown)		this is an
		amende	d filing
<b>∩</b> £	finial Form 106Sum		
	<u>ficial Form 106Sum</u> mmary of Your Assets and Liabilities and Certain Statistical Information	12	2/15
Be a	as complete and accurate as possible. If two married people are filing together, both are equally responsible rmation. Fill out all of your schedules first; then complete the information on this form. If you are filing amer roriginal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	for supplying	correct s after you file
Раг	t 1: Summarize Your Assets		
		Your ass Value of	sets what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	248,160.00
	1b. Copy line 62, Total personal property, from Schedule A/B	. \$	108,350.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	356,510.00
Par	t 2: Summarize Your Liabilities		
		Your lial Amount	*
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.	\$	253,000.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	81,400.00
	Your total liabiliti	es \$	334,400.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106t) Copy your combined monthly income from line 12 of Schedule I	, \$	5,097.84
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,734.52
Par	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with	your other sch	edules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	for a personal,	family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check the court with your other schedules.	this box and su	bmit this form to

Entered 08/30/16 22:48:07 Case 16-27892 Doc 1 Filed 08/30/16 Desc Main Page 9 of 42 Case number (if known) Document

Debtor 1 Martha Kugelberg

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 7,099.29 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report a priority claims. (Copy line 6g.)	s \$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Fill in this information to identify your case and this filing: Debtor 1 Martha Kugelberg Middle Name Last Name First Name Debtor 2 Last Name Middle Name First Name (Spouse, if filing) NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: ☐ Check if this is an Case number amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2 Yes. Where is the property? 1.1 What is the property? Check all that apply Do not deduct secured claims or exemptions. Put 4512 Hunt Club Court Single-family home the amount of any secured claims on Schedule D: Street address, if available, or other description Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Condominium or cooperative Manufactured or mobile home Current value of the Current value of the portion you own? Oswego IL 60543-0000 entire property? \$248,160.00 \$248,160.00 State ZIP Code Investment property City Timeshare Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one Tenancy by the Entirety Debtor 1 only Kendall Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number:

Kendall County Assessor lists FMV at \$264,000. 6% Real Estate Commission = \$15,840. Debtors would receive \$248,160 if they were to sell at this time.

 Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......=>

\$248,160.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

	Case 16-27892 Doc 1			sc Main
Debtor 1	Martha Kugelberg	Document Page 11 of 42 <sub>C</sub>	ase number (if known)	
3. Cars, va	ans, trucks, tractors, sport utility ver	icles, motorcycles		
□ No				
Yes				
3.1 Mak	ke: Mercury	Who has an interest in the property? Check one	the amount of any secure	laims or exemptions. Put ed claims on Schedule D:
Mod		Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.
Yea		Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	proximate mileage: 110000 per information:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	citing property.	<b>,</b>
		Check if this is community property (see instructions)	\$3,500.00	\$3,500.00
■ No □ Yes  5 Add th	ne dollar value of the portion you ow you have attached for Part 2. Write t	n for all of your entries from Part 2, including a hat number here	any entries for =>	\$3,500.00
Do you o	escribe Your Personal and Household Ite wn or have any legal or equitable int hold goods and furnishings			Current value of the portion you own? Do not deduct secured claims or exemptions.
Examp □ No	oles: Major appliances, furniture, linens  Describe	china, kitchenware		
	f <b>ai</b> di	1.54-1		\$400.00
	Major appliance	s, furniture, kitchenware	<u></u>	
□No	onics  oles: Televisions and radios; audio, vide including cell phones, cameras, m  Describe	eo, stereo, and digital equipment; computers, print ledia players, games		
	Televisions, co	nputers, cell phones		\$400.00
Examp	tibles of value	prints, or other artwork; books, pictures, or other a		paseball card collections;
9. Equipr Examp	ment for sports and hobbies	nd other hobby equipment; bicycles, pool tables, g	polf clubs, skis; canoes and	kayaks; carpentry tools;
■ No □ Yes	s. Describe			
10. Firea Exan ■ No	rms nples: Pistols, rifles, shotguns, ammuni	tion, and related equipment		

Official Form 106A/B Schedule A/B: Property page 2

		Case 16-27892	Doc 1	Filed 08/30/16	Entered 08/30/16 22:48:07	Desc Main
Dε	ebtor 1	Martha Kugelberg		Document	Page 12 of 42 <sub>Case number (if known)</sub>	
	☐ Yes.	Describe				
	□ No	es ples: Everyday clothes, furs Describe	, leather coat	s, designer wear, shoes	accessories	
		Everda	y clothing,	shoes, accessories		\$250.00
12.	Jewelr Examp □ No	<b>ry</b> ples: Everyday jewelry, cos	tume jewelry,	engagement rings, wed	ding rings, heirloom jewelry, watches, gems,	gold, silver
	Yes.	Describe				
		Weddi	ng Ring			\$250.00
13.		a <mark>rm animals</mark> ples: Dogs, cats, birds, hors	ses			
	■ No	Describe				
14.	Any of	ther personal and househ	old items vo	ou did not already list, i	ncluding any health aids you did not list	
	■ No	·		•	. ,	
	∐ Yes.	Give specific information	***			·····
15		the dollar value of all of y art 3. Write that number h			ny entries for pages you have attached	\$1,300.00
						1,
		escribe Your Financial Assets wn or have any legal or ed	and the second second	rest in any of the follow	ving?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	. Cash Exam □ No	oples: Money you have in yo	our wallet, in y	your home, in a safe dep	osit box, and on hand when you file your peti	tion
					Cash	\$50.00
17	Exam			ial accounts; certificates ecounts with the same in	of deposit; shares in credit unions, brokerage stitution, list each.	houses, and other similar
	☐ No ■ Yes			Institution	name:	
		17.1.		Citibank Citibank	ional Bank (\$500.00) Checking (\$500.00) Savings (\$500.00)	\$1,500.00
			٠			
18	Exam	s, mutual funds, or public aples: Bond funds, investme			ney market accounts	
	■ No □ Yes		Institution or	issuer name:		
19		oublicly traded stock and venture	interests in i	incorporated and unine	corporated businesses, including an intere	est in an LLC, partnership, and
		. Give specific information	about them			
Of	ficial Fo	rm 106A/B		Schedule A/B:	Property	page 3

		Case 16-27892	Doc 1		Entered 08/30/16 22:48:07	Desc Main	
Deb	tor 1	Martha Kugelberg	Document		Page 13 of 42 <sub>Case number (if known)</sub>		
		Na	me of entity:		% of ownership:		
		Ви	ıilt for Learn	ing	100% %	\$0.00	
	Megatia	ment and corporate bo able instruments include agotiable instruments are	nersonal check	ks. cashiers' checks, pro	egotiable instruments missory notes, and money orders. by signing or delivering them.		
	<b>■</b> No	Give specific information	about them				
		Iss	suer name:				
	Retiren <i>Examp</i> ⊒ No	nent or pension accour les: Interests in IRA, ERI	nts ISA, Keogh, 40	1(k), 403(b), thrift saving	gs accounts, or other pension or profit-sharing	plans	
	Yes.	List each account separa Type	etely. of account:	Institution	name:		
				America Teachers	n Funds Roth Ira (\$7,000) s' Retirement System (\$95,000)	\$102,000.00	
	Vours	ty deposits and prepayt hare of all unused depos ples: Agreements with lar	ils vou have m	ade so that you may cord rent, public utilities (ele	ntinue service or use from a company ectric, gas, water), telecommunications compa	nies, or others	
_				Institution	name or individual:		
23.	Annuit	ies (A contract for a perio	odic payment c	of money to you, either fo	or life or for a number of years)		
	■ No □ Yes	lssuer nar	me and descrip	otion.			
	Interest 26 U.S. ■ No	ts in an education IRA, C. §§ 530(b)(1), 529A(b)	in an account , and 529(b)(1)	in a qualified ABLE pi	rogram, or under a qualified state tuition pr	ogram.	
		Institution	name and des	scription. Separately file	the records of any interests.11 U.S.C. § 521(c	;):	
	Trusts ■ No	, equitable or future int	erests in prop	erty (other than anythi	ng listed in line 1), and rights or powers ex	cercisable for your benefit	
ı	□ Yes.	Give specific informatio	n about them				
	Patent Examp	s, copyrights, trademai ples: Internet domain nar	r <b>ks, trade seci</b> nes, websites,	rets, and other intellect proceeds from royalties	tual property and licensing agreements		
		Give specific informatio	n about them				
27.	Licens Examp	ses, franchises, and oth ples: Building permits, ex	ner general int	angibles es, cooperative associati	on holdings, liquor licenses, professional licer	nses	
	No Yes	Give specific information	n about them				
		property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.	
_	_					Gamis or exemptions.	
	Tax re ■ No	funds owed to you					
		Give specific information	n about them, i	ncluding whether you al	ready filed the returns and the tax years		
29.	Family Exam	/ support ples: Past due or lump s	um alimonv. sr	oousal support, child sup	port, maintenance, divorce settlement, prope	rty settlement	
	■ No			.,			
	☐ Yes.	. Give specific informatio	n				

		Case 16-2	7892	Doc 1	Filed 08/30/16	Entered 08/30/16 22:48:07	Desc Main
Debto	or 1	Martha Kugel	berg		Document	Page 14 of 42 <sub>Case number (if known)</sub>	
30. <b>O</b>	ther a Examp	amounts someon oles: Unpaid wages benefits; unpa	s, disabil	ity insurance	payments, disability ben someone else	efits, sick pay, vacation pay, workers' compe	nsation, Social Security
	No Yes.	Give specific info	rmation				
E	iteres ∑xamp No	ts in insurance p ples: Health, disabi	olicies ility, or lif	e insurance; l	health savings account (	(HSA); credit, homeowner's, or renter's insura	nce
	Yes.	Name the insuran		any of each p ipany name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
			No	m Life Insu Cash Value			\$0.00
				m Life Insu			\$0.00
			No	Cash Value			Ψ0.00
 	f you .	terest in property are the beneficiary one has died.	that is of a living	due you fron ng trust, expe	n someone who has di ct proceeds from a life i	ed nsurance policy, or are currently entitled to red	eive property because
	Yes.	Give specific info	rmation				
_ !	Exam	against third pa oles: Accidents, er	rties, wh nployme	nether or not nt disputes, ir	you have filed a lawsunsurance claims, or right	uit or made a demand for payment ts to sue	
	No I Yes.	Describe each cl	aim				
	No				f every nature, includi	ng counterclaims of the debtor and rights (	o set off claims
		Describe each cl					
	No	nancial assets yo Give specific info			<b>t</b>		
							;
36.						any entries for pages you have attached	\$103,550.00
Part	5: De	escribe Any Busines	ss-Relate	d Property Yo	u Own or Have an Interes	t In. List any real estate in Part 1.	
	-		gal or equ	uitable interes	t in any business-related	property?	
		o to Part 6. Go to line 38.					
Part		escribe Any Farm- a you own or have an i				wn or Have an Interest In.	
		u own or have an	y legal o	or equitable i	interest in any farm- o	r commercial fishing-related property?	
		s. Go to Part 7.					
Part	<b>7:</b> 300	Describe All Pro	perty You	u Own or Have	an Interest in That You D	old Not List Above	

Schedule A/B: Property page 5

Best Case Bankruptcy

Official Form 106A/B

Page 15 of 42<sub>Case number (if known)</sub> Document Debtor 1 Martha Kugelberg 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes, Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form Part 8: \$248,160.00 55. Part 1: Total real estate, line 2 ..... \$3,500.00 56. Part 2: Total vehicles, line 5 57. Part 3: Total personal and household items, line 15 \$1,300.00 Part 4: Total financial assets, line 36 \$103,550.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Copy personal property total \$108,350.00 62. Total personal property. Add lines 56 through 61... \$108,350.00 \$356,510.00 63. Total of all property on Schedule A/B. Add line 55 + line 62

Entered 08/30/16 22:48:07

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Filed 08/30/16

Doc 1

Official Form 106A/B Schedule A/B: Property page 6

Case 16-27892

Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main

Fill in this infor	mation to identify your	case:		
Debtor 1	Martha Kugelber			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an amended filing

#### Official Form 106C

#### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

o t	he applicable statutory amount.											
Pa	rt 1: Identify the Property You Claim as E	Exempt										
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.								
	You are claiming state and federal nonbar	kruptcy exemptions.	11 U.S	i.C. § 522(b)(3)								
	☐ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)										
2.	For any property you list on Schedule A/B	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.										
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption							
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.								
	206 Mercury (110.000 Miles)	\$3,500.00			735 ILCS 5/12-1001(c)							
	Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit								
	Household Goods & Furnishings Line from Schedule A/B:	\$400.00		\$400.00	735 ILCS 5/12-1001(b)							
	Line from Schedule A/B.			100% of fair market value, up to any applicable statutory limit								
	Electronics Line from Schedule A/B:	\$400.00		\$400.00	735 ILCS 5/12-1001(b)							
	Line from Schedule Arb.			100% of fair market value, up to any applicable statutory limit								
	Clothing	\$250.00		\$250.00	735 ILCS 5/12-1001(a)							
	Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit								
	Jewlery Line from Schedule A/B:	\$250.00		\$250.00	735 ILCS 5/12-1001(b)							
	Line Irom Schedule Arb.			100% of fair market value, up to any applicable statutory limit								

	Case 16-27892 Doc 1	Filed 08/30/16 Document		Entered 08/30/16 22:48 Page 17 of 42 <sub>number (if known)</sub>	:07 Desc Main	
Debto	1 Martha Kugelberg			Casé number (if known)		
	ief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	ash ne from <i>Schedule A/B</i> :	\$50.00		\$50.00	735 ILCS 5/12-1001(b)	
LI	THE HOTH GENERALE PV.D.			100% of fair market value, up to any applicable statutory limit		
	eposits of Money ne from Schedule A/B:	\$1,500.00		\$1,500.00	735 ILCS 5/12-1001(b)	
ŁI	ne irom <i>Scriedule Arb</i> .			100% of fair market value, up to any applicable statutory limit		
•	etirement or Pension Accounts	\$102,000.00		\$102,000.00	735 ILCS 5/12-1006	
	The Holli Schedule 742.			100% of fair market value, up to any applicable statutory limit		
_	erm Life Insurance	\$0.00			215 ILCS 5/238	
	o Cash Value ne from Schedule A/B:			100% of fair market value, up to any applicable statutory limit		
3. A (\$	re you claiming a homestead exemption Subject to adjustment on 4/01/19 and every 3	of more than \$160,375 3 years after that for cas	? ses f	iled on or after the date of adjustme	nt.)	
	Yes. Did you acquire the property covere	ed by the exemption with	hin 1	,215 days before you filed this case	?	
	□ No					
	☐ Yes					

Entered 08/30/16 22:48:07 Case 16-27892 Doc 1 Filed 08/30/16 Desc Main Fill in this information to identify your case: Debtor 1 Martha Kugelberg First Name Middle Name Last Name Debtor 2 Middle Name Last Name (Spouse if, filing) First Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number ☐ Check if this is an (if known) amended filing Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). 1. Do any creditors have claims secured by your property? ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims Column C Column A Column B 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately Value of collateral Unsecured Amount of claim for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As portion much as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the that supports this value of collateral. claim If any \$253,000.00 \$248,160.00 \$4.840.00 Describe the property that secures the claim: Shellpoint Mortgage 2.1 Creditor's Name Single Family Home As of the date you file, the claim is: Check all that PO Box 619063 Dallas, TX 75261 ☐ Contingent Number, Street, City, State & Zip Code ☐ Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) car loan) Debtor 2 only Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit At least one of the debtors and another Check if this claim relates to a First Mortgage Other (including a right to offset) community debt Last 4 digits of account number 7402 Date debt was incurred

Part 2: List Others to Be Notified for a Debt That You Already Listed

If this is the last page of your form, add the dollar value totals from all pages.

Add the dollar value of your entries in Column A on this page. Write that number here:

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

\$253,000.00

\$253,000.00

page 1 of 1

Write that number here:

Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 19 of 42

Fill in this information	n to identify	our case	<del>)</del> :										
	lartha Kuge	lberg											
	rst Name		Middle	Name		Last Name							
Debtor 2 (Spouse if, filing) Fire	rst Name		Middle	Name		Last Name							
United States Bankrup	otcy Court for	he: NO	ORTHE	RN DISTF	RICT OF	ILLINOIS							
Ones mumber													
Case number (if known)									1		Check	if this is a	ก
											amend	ed filing	
D#: -: -1	00E/E												
Official Form 10	*******	1871				ما شام ا	_					12/1	E
Schedule E/F: Be as complete and accu													
eft. Attach the Continual		page. ii	, 50	J		p. a. r	,			•		. •	-
Part 1: List All of Y	Your PRIORI	TY Unsec	ured C	laims									
Part 1: List Ali of \	ave priority uns												
Part 1: List All of \( \)  1. Do any creditors ha \[ \begin{array}{c} No. Go to Part 2. \] \[ \begin{array}{c} Yes. \end{array}	ave priority uns	ecured cla	ims aga	inst you?									
Part 1: List All of \( \)  1. Do any creditors ha \( \bigcup \) No. Go to Part 2. \( \bigcup \) Yes.  2. List all of your prior identify what type of opossible, list the claim	rity unsecured claim it is. If a come in alphabetic	claims. If a aim has bo al order acc	aims aga a credito oth priorit cording (	ninst you?  Thas more y and nonprothe credit	riority amo lor's name	ounts, list that c , If you have m	laim here a	nd show both	priority a	ind nonprior	ity amoun	ts. As muc	n as
Part 1: List All of Y  1. Do any creditors ha  \[ \begin{align*} No. Go to Part 2. \]  Yes.  2. List all of your prior identify what type of a possible, list the claim Part 1. If more than a	rity unsecured claim it is, if a c ms in alphabetic one creditor hole	claims. If a aim has bo al order act is a particul	a credito oth priorit cording t	r has more y and nonp to the credit , list the oth	riority amo lor's name ner credito	ounts, list that c , If you have m rs in Part 3.	laim here a ore than tw	nd show both	priority a	ind nonprior	ity amoun	ts, As muc nuation Pa	n as ge of
Part 1: List All of \( \)  1. Do any creditors ha \( \bigcup \) No. Go to Part 2. \( \bigcup \) Yes.  2. List all of your prior identify what type of opossible, list the claim	rity unsecured claim it is, if a c ms in alphabetic one creditor hole	claims. If a aim has bo al order act is a particul	a credito oth priorit cording t	r has more y and nonp to the credit , list the oth	riority amo lor's name ner credito	ounts, list that c , If you have m rs in Part 3.	laim here a ore than tw	nd show both	i priority a ecured cl	ind nonprior	ity amoun	ts. As muc	n as ge of
Part 1: List All of Y  1. Do any creditors ha  No. Go to Part 2.  Yes.  2. List all of your prior identify what type of consible, list the claim Part 1. If more than of (For an explanation of the consideration of the co	rity unsecured claim it is. If a come creditor hole of each type of the Treat	claims. If a aim has bo al order ace is a particulaim, see the	a credito oth priorit cording t	r has more y and nonpoor the credit , list the oth ctions for th	riority amo lor's name ner credito nis form in	ounts, list that c , If you have m rs in Part 3.	laim here a ore than tw	nd show both o priority uns	i priority a ecured cl	end nonprior aims, fill out Priority amount	ity amoun	ts. As muc nuation Pa Nonprio amount	n as ge of rity
Part 1: List All of Y  1. Do any creditors ha  No. Go to Part 2.  Yes.  2. List all of your prior identify what type of opossible, list the claim Part 1. If more than of (For an explanation of the priority Creditor Internal Rev	rity unsecured claim it is. If a come creditor hole of each type of the Treat's Name	claims. If a aim has bo al order aco is a particulation, see the sury	a credito oth priorit cording t	r has more y and nonp o the credit , list the oth ctions for th	riority amo lor's name ner credito nis form in pits of acc	ounts, list that c , If you have m rs in Part 3. the instruction	laim here a ore than tw	nd show both o priority uns	n priority a ecured cl	end nonprior aims, fill out Priority amount	ity amoun the Conti	ts. As muc nuation Pa Nonprio amount	n as ge of rity
Part 1: List All of Y  1. Do any creditors ha  No. Go to Part 2.  Yes.  2. List all of your prior identify what type of oposible, list the clain Part 1. If more than of (For an explanation of the priority Creditor)  2.1 Department Priority Creditor	rity unsecured claim it is. If a class in alphabetic one creditor hole of each type of the Tread's Name venue Serviy, MO 64993	claims. If a aim has bo al order act is a particulation, see the sury	a credito oth priorit cording t	r has more y and nonp o the credit , list the oth ctions for th	riority amo or's name ner credito his form in pits of acc s the debt	ounts, list that c , if you have m rs in Part 3. the instruction  ount number	faim here a	nd show both o priority uns Total clain	n priority a ecured cl	end nonprior aims, fill out Priority amount	ity amoun the Conti	ts. As muc nuation Pa Nonprio amount	n as ge of rity
Part 1: List All of Y  1. Do any creditors ha  No. Go to Part 2.  Yes.  2. List all of your prior identify what type of compossible, list the claim Part 1. If more than of (For an explanation of the priority Creditor internal Revision Re	rity unsecured claim it is. If a come creditor hold of each type of the Treat's Name venue Serviy, MO 64998 City State ZIp C	claims. If a aim has bo al order act is a particulation, see the sury	a credito oth priorit cording t	r has more y and nonp o the credit , list the oth ctions for th	riority amo or's name ner credito his form in gits of acc s the debt date you	ounts, list that c , If you have m rs in Part 3, the instruction count number t incurred?	faim here a	nd show both o priority uns Total clain	n priority a ecured cl	end nonprior aims, fill out Priority amount	ity amoun the Conti	ts. As muc nuation Pa Nonprio amount	n as ge of rity
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Part 1: List All of Y  1. Do any creditors ha  No. Go to Part 2.  Yes.  2. List all of your prior identify what type of consible, list the claim Part 1. If more than of (For an explanation of the priority Creditor Internal Rev Kansas City Number Street Countered the consideration of the priority Creditor Internal Rev Kansas City Number Street Countered the consideration of the priority Creditor Internal Rev Kansas City Number Street Counternal	rity unsecured claim it is. If a come creditor hold of each type of the Treat's Name venue Serviy, MO 64998 City State ZIp C	claims. If a aim has bo al order act is a particulation, see the sury	a credito oth priorit cording t	r has more y and nonpoon to credit, list the oth ctions for the Last 4 dig  When was  As of the	riority amo or's name ner credito nis form in gits of acc s the debi date you gent idated	ounts, list that c , If you have m rs in Part 3, the instruction count number t incurred?	faim here a	nd show both o priority uns Total clain	n priority a ecured cl	end nonprior aims, fill out Priority amount	ity amoun the Conti	ts. As muc nuation Pa Nonprio amount	n as ge of rity
Part 1: List All of N  1. Do any creditors ha  No. Go to Part 2.  Yes.  2. List all of your prior identify what type of compossible, list the claim Part 1. If more than of (For an explanation of the Priority Creditor internal Rev Kansas City Number Street Composition of the Priority Creditor internal Rev Kansas City Number Street Composition of the Debtor 1 only	rity unsecured claim it is. If a come creditor hole of each type of the Tread's Name venue Serviy, MO 64998 City State Zip C debt? Check o	claims. If a aim has bo al order act is a particulation, see the sury	a credito oth priorit cording t	r has more y and nonpoor the credit i, list the oth ctions for the Last 4 dig When was As of the Continu Unliqui	riority amoloc's name ner credito nis form in gits of acc s the debi date you gent idated	ounts, list that c , If you have m rs in Part 3, the instruction count number t incurred?	faim here a ore than tw booklet.)	nd show both o priority uns Total clain	n priority a ecured cl	end nonprior aims, fill out Priority amount	ity amoun the Conti	ts. As muc nuation Pa Nonprio amount	n as ge of rity
Part 1: List All of Y  1. Do any creditors ha  No. Go to Part 2.  Yes.  2. List all of your prior identify what type of opossible, list the claim Part 1. If more than of (For an explanation of Internal Rev Kansas City Number Street C Who incurred the Debtor 1 only  Debtor 2 only	rity unsecured claim it is. If a come in alphabetic one creditor hole of each type of the Tream's Name venue Serving, MO 64998 City State Zip Codebt? Check of the Check of th	claims. If a aim has bo all order accils a particulation, see the sury ceep-0025 and a color accils accils a color accils accil accils accils accil accils accil accil accils accil accid accid accil accil accil accil accil accil accil accil accid	a credito oth priorit cording t	r has more y and nonport of the credit , list the oth ctions for the Last 4 dig  When was As of the Continue Co	riority amoloc's name ner credito nis form in gits of acc s the debt date you gent idated ed 'RIORITY'	ounts, list that c , If you have m rs in Part 3, the instruction count number t incurred? file, the claim	faim here a ore than tw booklet.)	nd show both o priority uns Total clain	n priority a ecured cl	end nonprior aims, fill out Priority amount	ity amoun the Conti	ts. As muc nuation Pa Nonprio amount	n as ge of rity
Part 1: List All of Y  1. Do any creditors ha  No. Go to Part 2.  Yes.  2. List all of your prior identify what type of opossible, list the claim Part 1. If more than of (For an explanation of Internal Rev Kansas City Number Street C Who incurred the Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 and Debtor 1 a	rity unsecured claim it is. If a cine creditor hold of each type of the Treat's Name venue Serviy, MO 64999 City State ZIP Cidebt? Check of the debtors and	claims. If a aim has bo al order access a particulation, see the sury ceep-0025 ode ne.	a credito oth priorit cording t lar claim he instru	r has more y and nonpoor the credit i, list the othetions for the Last 4 dig  When was  As of the  Continue  Unliquit  Disput  Type of P	riority amo or's name ner credito his form in gits of acc s the debi date you gent idated ed 'RIORITY stic suppo:	ounts, list that c , if you have mers in Part 3. the instruction count number t incurred? file, the claim	daim here a ore than tw booklet.) is: Check a	Total clain	a priority a ecured cl	end nonprior aims, fill out Priority amount	ity amoun the Conti	ts. As muc nuation Pa Nonprio amount	n as ge of rity
Part 1: List All of N  1. Do any creditors ha  No. Go to Part 2.  Yes.  2. List all of your prior identify what type of opossible, list the claim Part 1. If more than of (For an explanation of the Priority Creditor Internal Rev Kansas City Number Street C Who incurred the Debtor 1 only  Debtor 2 only  At least one of the Priority Creditor Internal Rev Kansas City Number Street C Who incurred the Debtor 1 only  Debtor 1 only  At least one of the Priority Creditor Internal Rev Kansas City Number Street C Who incurred the Priority Creditor Internal Rev Kansas City Number Street C Who incurred the Priority Creditor Internal Rev Kansas City Number Street C Who incurred the Priority Creditor Internal Rev Kansas City Number Street C Who incurred the Priority Creditor Internal Rev Kansas City Number Street C Who incurred the Priority Creditor Internal Rev Kansas City Number Street C Who incurred the Priority C T Only Number Street C Who incurred the Priority C T Only Number Street C Who incurred the Priority C T Only Number Street C Who incurred the Priority C T Only Number Street C Who incurred the Priority C T Only Number Street C Who incurred the Priority C T Only Number Street C Who incurred the Priority C T Only Number Street C Who incurred the Priority C T Only Number Street C Who incurred the Priority C T Only Number Street C Who incurred the Priority C T Only Number Street C Who incurred the Priority C T Only Number Street C W N	rity unsecured claim it is. If a come creditor hold of each type of the Tread's Name venue Serviy, MO 64998 City State ZIP Codebt? Check of the debtors and claim is for a codesire of the codesign of the debtors and claim is for a codesire the claim is codesired to code in the claim is codesired the claim is codesired to code in the claim is codesired to codesired the claim is codesired to code in the claim is codesired to codesired to code in the claim is codesired to codesired to code in the claim is codesired to code in the claim is codes	claims. If a aim has bo al order access a particulation, see the sury ceep-0025 ode ne.	a credito oth priorit cording t lar claim he instru	r has more y and nonpoor the credit in the other credit in the oth	riority amo or's name ner credito nis form in gits of acc s the debi date you gent idated ed 'RIORITY stic suppo: and certa	ounts, list that c , If you have m rs in Part 3, the instruction count number t incurred? file, the claim unsecured cla rt obligations	is: Check a	Total clain  that apply  government	a priority a cured cl	end nonprior aims, fill out Priority amount	ity amoun the Conti	ts. As muc nuation Pa Nonprio amount	n as ge of rity
Part 1: List All of N  1. Do any creditors ha  No. Go to Part 2.  Yes.  2. List all of your prior identify what type of opossible, list the claim Part 1. If more than of (For an explanation of Internal Rev Kansas City Number Street C Who incurred the Debtor 1 only  Debtor 1 only  Debtor 2 only  At least one of t  Check if this claim	rity unsecured claim it is. If a come creditor hold of each type of the Tread's Name venue Serviy, MO 64998 City State ZIP Codebt? Check of the debtors and claim is for a codesire of the codesign of the debtors and claim is for a codesire the claim is codesired to code in the claim is codesired the claim is codesired to code in the claim is codesired to codesired the claim is codesired to code in the claim is codesired to codesired to code in the claim is codesired to codesired to code in the claim is codesired to code in the claim is codes	claims. If a aim has bo al order access a particulation, see the sury ceep-0025 ode ne.	a credito oth priorit cording t lar claim he instru	r has more y and nonpoor the credit in the other credit in the oth	riority amo cor's name ner credito his form in gits of acc s the debi date you gent idated ed RIORITY stic suppo: and certa s for death	nunts, list that c , If you have m rs in Part 3, the instruction count number t incurred? file, the claim unsecured cla rt obligations in other debts y	is: Check a	Total clain  that apply  government	a priority a cured cl	end nonprior aims, fill out Priority amount	ity amoun the Conti	ts. As muc nuation Pa Nonprio amount	n as ge of

## Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 20 of 42

Deb	otor 1 Martha Kugelberg		Case number (if know)	
2.2	Illinois Department of Revenue Priority Creditor's Name	Last 4 digits of account number	\$0.00	\$0.00 \$0.00
	Tax Department 9511 Harrison St.	When was the debt incurred?		
	Des Plaines, IL 60016 Number Street City State Zlp Code	As of the date you file, the claim is:	Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	☐ Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
	At least one of the debtors and another	☐ Domestic support obligations		
	☐ Check if this claim is for a community debt	Taxes and certain other debts you o	we the government	
	Is the claim subject to offset?	Claims for death or personal injury	vhile you were intoxicated	
	■ No	Other, Specify		
	Yes	For Notice Or	ly	
	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each clathan one creditor holds a particular claim, list the other Part 2.	aim. For each claim listed, identify what t	voe of claim it is. Do not list claim	s already included in Part 1. If more
			Martana	
4.1	Bureaus Investment Group Nonpriority Creditor's Name	Last 4 digits of account number	Various	Unknown
	1717 Central St. Evanston, IL 60201	When was the debt incurred?	2010-2016	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	f claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that	you did not
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	☐ Other. Specify of late, ove	ice: disputed as to the a rlimit and interest fees.	mount

# Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 21 of 42

Debtor '	<sup>1</sup> Martha Kugelberg			Case number (if know)				
	Capital One Nonpriority Creditor's Name	Last 4 digits of account num	ber	1169	\$5,500.00			
	P.O. Box 5253 Carol Stream, IL 60197	When was the debt incurred	?	2011-2016				
**	Number Street City State Z[p Code  Who incurred the debt? Check one.	As of the date you file, the cl	aim is	s: Check all that apply				
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unser	cured	claim:				
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a report as priority claims	sepai	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-s	haring	g plans, and other similar debts				
	Yes	Credit S	Servi	ce: disputed as to the amount limit and interest fees.				
	Capital One Nonpriority Creditor's Name	Last 4 digits of account num	ber	0315	\$10,500.00			
	P.O. Box 5253	When was the debt incurred	?	2011-2016				
	Carol Stream, IL 60197 Number Street City State ZIp Code	As of the date you file, the cl	aim is					
1	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No	Debts to pension or profit-sharing plans, and other similar debts						
	,,,	Credit Service: disputed as to the amount						
	☐ Yes	Other. Specify of late,	over	limit and interest fees.				
	Capital One Nonpriority Creditor's Name	Last 4 digits of account num	ber	3316	\$10,000.00			
	P.O. Box 5253	When was the debt incurred	?	2011-2016				
ï	Carol Stream, IL 60197 Number Street City State Zip Code	As of the date you file, the cl	aim is					
	Who incurred the debt? Check one.							
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	Unliquidated						
	Debtor 1 and Debtor 2 only	Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unser  Student loans	cured	claim:				
(	☐ Check if this claim is for a community debt	☐ Obligations arising out of a	separ	ration agreement or divorce that you did not				
	s the claim subject to offset? ■ No	report as priority claims  Debts to pension or profit-s	sharing plans, and other similar debts					
ı	IXU	·	•	ce: disputed as to the amount				
1	☐ Yes	Other. Specify of late,	over	limit and interest fees.				

# Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 22 of 42

Debtor	1 Martha Kugelberg		Case number (if know)					
4.5	Chase Nonpriority Creditor's Name	Last 4 digits of account number	0421	\$19,000.00				
	P.O. Box 15298 Wilmington, DE 19850	When was the debt incurred?	2011-2016					
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	☐ Check if this claim is for a community debt	Student toans  Obligations arising out of a sep-	aration agreement or divorce that you did not					
	is the claim subject to offset?	report as priority claims						
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
	Yes	Credit Serve of late, over	vice: disputed as to the amount erlimit and interest fees.					
	Citicards CBNA Nonpriority Creditor's Name	Last 4 digits of account number	8858	\$13,000.00				
	701 E. 60th St. N Sioux Falls, SD 57104	When was the debt incurred?	2011-2016					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts					
	☐ Yes	Credit Serv Other. Specify of late, over	rice: disputed as to the amount erlimit and interest fees.					
				·				
4.7	Discover Bank Issuer ofthe Discover	Last 4 digits of account number	0178	\$11,000.00				
	Nonpriority Creditor's Name							
1	P.O. Box 3025 C/O DB Servicing Corporation New Albany, OH 43054	When was the debt incurred?	2011-2016					
Ì	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:					
	Check if this claim is for a community	☐ Student loans						
(	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharing	ig plans, and other similar debts					
1	☐ Yes	Credit Serve of late, ove	rice: disputed as to the amount rlimit and interest fees,					
	en e							

# Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 23 of 42

Dento	1 Martha Kugelberg	Case number (if know)	
4.8	Dupage Valley Anesthesiologists Ltd	Last 4 digits of account number XXXX	\$400.00
1	Nonpriority Creditor's Name 801 S. Washington St.	Last 4 digits of account number XXXX  When was the debt incurred? 2011-2016	\$100.00
	Naperville, IL 60540 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	•••
	Debtor 1 only		
	, , , , , , , , , , , , , , , , , , ,	☐ Contingent	
	☐ Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	U Obligations arising out of a separation agreement or divorce that you did no report as priority claims	t
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other, Specify Medical	
4.9	Edwards Hospital Nonpriority Creditor's Name	Last 4 digits of account number XXXX	\$1,000.00
	801 S. Washington St. Naperville, IL 60540	When was the debt incurred? 2011-2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did no report as priority claims	t
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical	
			****
: 7	Frontline Asset Strategies Nonpriority Creditor's Name	Last 4 digits of account number Various	\$10,275.00
	2700 Fort Snelling Ave North Suite 250	When was the debt incurred? 2010-2016	
	Saint Paul, MN 55113 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did no report as priority claims	t
	No No	Debts to pension or profit-sharing plans, and other similar debts	
ı	□ Yes	Other. Specify  Credit Service: disputed as to the amount of late, overlimit and interest fees.	

# Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 24 of 42

Debtor	1 Martha Kugelberg		Case number (if know)
4.1	Naperville Radiologists	Last 4 digits of account number	various \$25.00
	Nonpriority Creditor's Name 801 S. Washington St. Naperville, IL 60540	When was the debt incurred?	2011-2016
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	n is: Check all that apply
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecur	red claim:
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a segreport as priority claims	paration agreement or divorce that you did not
	■ No	Debts to pension or profit-shar	ring plans, and other similar debts
	☐ Yes	Other. Specify Medical	
4.1	Duck Content to a site!		0072 \$4,000,00
2	Rush-Copley Hospital Nonpriority Creditor's Name	Last 4 digits of account numbe	r 8673 \$1,000.00
	2000 Odgen Ave. Aurora, IL 60504	When was the debt incurred?	2011-2016
	Number Street City State ZIp Code	As of the date you file, the claim	n is: Check all that apply
	Who incurred the debt? Check one,		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecu	red claim:
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a se report as priority claims	paration agreement or divorce that you did not
	■ No	Debts to pension or profit-sha	ring plans, and other similar debts
	Yes	Other, Specify Medical	
Part 3		· · · · · · · · · · · · · · · · · · ·	
is try have	ing to collect from you for a debt you owe to	someone else, list the original creditor nat you listed in Parts 1 or 2, list the ad	t you already listed in Parts 1 or 2. For example, if a collection agency in Parts 1 or 2, then list the collection agency here. Similarly, if you iditional creditors here. If you do not have additional persons to be
	and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?
	National		Part 1: Creditors with Priority Unsecured Claims
	3ox 29186		Part 2: Creditors with Nonpriority Unsecured Claims
WIISSI	on, KS 66201	Last 4 digits of account number	
Name a	and Address	On which entry in Part 1 or Part 2 did ye	ou list the original creditor?
ATG	Credit		☐ Part 1: Creditors with Priority Unsecured Claims
	W. Corland St.		Part 2: Creditors with Nonpriority Unsecured Claims
Suite Chica	201 Igo, IL 60622		
0,,,,,,	.90, 12 00022	Last 4 digits of account number	
Name a	and Address	On which entry in Part 1 or Part 2 did y	ov list the original creditor?
Clien	t Services, Inc.		Part 1: Creditors with Priority Unsecured Claims
	Harry S. Truman Blvd		Part 2: Creditors with Nonpriority Unsecured Claims
Saint	Charles, MO 63301	Last 4 digits of account number	
		The second second second	
	and Address ervices	On which entry in Part 1 or Part 2 did you be seen as the seed of (Check one):	ou list the original creditor?  ☐ Part 1: Creditors with Priority Unsecured Claims
	Gulfton		Part 2: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
			- Tan E. Oreuloss with non-priority onsecured Gallins

Official Form 106 E/F

### Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 25 of 42

Debtor 1 Mar	tha K	ugelberg		Case	numbe	er (if know)	
Houston, TX	77118	1					
riouston, in		•	£ast 4 digits of account number				
Name and Addre	188		On which entry in Part 1 or Part 2 did	vou list the o	original	creditor?	
Medical Bus		Bureau	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Claims			
1460 Renaissance Dr.						ors with Nonpriority Unsecured Claims	
Suite 400					O TO WITE	The time to he had been a second	
Park Ridge,	IL 600	68	Last 4 digits of account number				
			East 4 digits of account fidinibal				
Name and Addre		<b>.</b>	On which entry in Part 1 or Part 2 did	•			
Medical Recovery Specialists 2250 E. Devon Ave.			Line <u>4.9</u> of (Check one):			ors with Priority Unsecured Claims	
Suite 352	on Ave	<b>2.</b>		Part 2:	Credit	ors with Nonpriority Unsecured Claims	
Des Plaines,	IL 60	018					
			Last 4 digits of account number				
Name and Addre			On which entry in Part 1 or Part 2 did	vou liet the r	oriainal	creditor2	
Merchants C		Guide	Line 4.9 of (Check one):	*	-	ors with Priority Unsecured Claims	
223 W. Jacks						ors with Nonpriority Unsecured Claims	
Chicago, IL	60606			- Fait 2.	Credit	of with Nonphority Offsecured Classis	
			Last 4 digits of account number				
Name and Addre	ss		On which entry in Part 1 or Part 2 did	you list the	original	creditor?	
Nationwide (		, Inc.	Line 4.5 of (Check one):	Part 1:	Credit	ors with Priority Unsecured Claims	
P.O. Box 263		40000		Part 2:	Credit	ors with Nonpriority Unsecured Claims	
Lehigh Valle	y, PA	10002	Last 4 digits of account number				
			ere ere ere er er	4			
Name and Addre United Reco			On which entry in Part 1 or Part 2 did	•	-		
P.O. Box 722		ysteins	Line 4.5 of (Check one):			ors with Priority Unsecured Claims	
Houston, TX		2		Part 2:	Credit	ors with Nonpriority Unsecured Claims	
•			Last 4 digits of account number				
Name and Addre	SS		On which entry in Part 1 or Part 2 did	you list the	original	creditor?	
Weltman, We			Line 4.7 of (Check one):	Part 1:	Credit	ors with Priority Unsecured Claims	
3705 Marlan		•		Part 2:	Credit	ors with Nonpriority Unsecured Claims	
Grove City, (	JH 43	123	Last 4 digits of account number				
Part 4: Add	the A	mounts for Each Type	of Unsecured Claim				
				al reporting	o nuro	oses only. 28 U.S.C. §159. Add the amounts for eac	:h
type of unseci	ured cla	im,			<b>,</b> ,	• · · · · · · · · · · · · · · · · · · ·	
						Total Claim	
	6a.	Domestic support oblig	gations	6a.	\$	0.00	
Total claims							
from Part 1	6b.	Taxes and certain other	r debts you owe the government	6b.	\$	0.00	
	6c.	Claims for death or per	sonal injury while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other prior	rity unsecured claims. Write that amount her	e. 6d.	\$	0.00	
	6e.	Total Priority, Add lines	6a through 6d.	6e.	\$	0.00	
					i		
	<b>~</b> 4	D4d==4.1====		0.		Total Claim	
Total	6f.	Student loans		6f.	\$	0.00	
claims							
from Part 2	6g.		of a separation agreement or divorce tha	t 6g,	\$	0.00	
	6h.	you did not report as pro- Debts to pension or pro-	riority claims ofit-sharing plans, and other similar debts		\$	0.00	
	6i.	Other, Add all other nong	priority unsecured claims. Write that amount			81,400.00	
		here.			\$	01,400.00	
	6i.	Total Nonpriority, Add I	ines 6f through 6i	6i.	s	81 400 00	

Official Form 106 E/F

Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 26 of 42

Fill in	this informa	ation to identify your	case:				
Debto	r 1	Martha Kugelberg	Middle Name		Last Name		
Debto							
	e if, filing) N States Bani	First Name kruptcy Court for the:	Middle Name	; DISTRICT OF ILLI	Last Name		
		Muptey Court for the.	NONTIERNE	NOTITION OF IEEE	11010		
Case (if know	number n)						☐ Check if this is an
ļ							amended filing
Offic	cial For	m 106G					
		G: Executory	/ Contrac	ts and U	nexpired	Leases	12/15
Be as inform	complete ar	nd accurate as possib	le. If two marrie	d people are filir nal page, fill it ou	ng together, both	n are equally respon	nsible for supplying correct to this page. On the top of any
		any executory contract this box and file this for	•		chadulas Vou ha	ove nothing else to re	enort on this form
				•		•	Official Form 106 A/B).
e	ist separate xample, rent nd unexpired	t, vehicle lease, cell pl	npany with who hone). See the in	m you have the sastructions for this	contract or lease s form in the instri	e. Then state what e uction booklet for mo	each contract or lease is for (for re examples of executory contracts
ı	Person or co	ompany with whom yo Name, Number, Street, City,		tract or lease	State what the	ne contract or lease	is for
2.1	Name						
	Number	Street					
2.2	City		State	ZIP Code		ensemble processors and the contract of the co	
2.2	Name						
	Number	Street					
2.3	City		State	ZIP Code		***************************************	e, e, e, e, e se en el constitución de la constitución de la constitución de la constitución de la constitución
2.0	Name						
	Number	Street					
2.4	City		State	ZIP Code		egyangan casa an	
۷. <del>۱۱</del>	Name						
	Number	Street					
2.5	City		State	ZIP Code	enterentententententententententen	ententalista (in territorio dell'international	e men a manus a casaccoma a casaccida (n. 1922). A casaccida (n. 1921) de la titula de la casaccida de la casa
۷.0	Name						
	Number	Street					

City State ZIP Code

Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 27 of 42

Fill in this info	ormation to identify your case:	
Debtor 1	Martha Kugelberg First Name Middle Name Last	Name
Debtor 2 (Spouse if, filing)	First Name Middle Name Last	Name
United States	Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	3
Case number (if known)		☐ Check if this is an amended filing
Official F	orm 106H	
<b>Schedul</b>	e H: Your Codebtors	12/15
your name and	number the entries in the boxes on the left. Attach the Addition dicase number (if known). Answer every question.  have any codebtors? (If you are filing a joint case, do not list either.)	nal Page to this page. On the top of any Additional Pages, write ner spouse as a codebtor.
	the last 8 years, have you lived in a community property state california, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Te	
■ No. Go	to line 3.	
☐ Yes. Di	d your spouse, former spouse, or legal equivalent live with you at	the time?
in line 2 a	gain as a codebtor only if that person is a guarantor or cosig D), Schedule E/F (Official Form 106E/F), or Schedule G (Offici	a codebtor if your spouse is filing with you. List the person shown ner. Make sure you have listed the creditor on Schedule D (Official al Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fil
	umn 1: Your codebtor , Number, Street, City, State and ZiP Code	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
451	nneth Kugelberg 2 Hunt Club Ct. vego, IL 60543	■ Schedule D, line 2.1 □ Schedule E/F, line □ Schedule G Shellpoint Mortgage

Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 28 of 42

Fill	in this information to identify your ca	ıse:	er enjag servej servij	·					
Deb	otor 1 Martha Kuge	lberg							
	otor 2 use, if filing)								
Unit	ted States Bankruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS						
	se number lown)					Check if this is:  An amended  A supplement	nt showir	• •	chapter
$\bigcirc$	fficial Form 106l							ollowing date:	
	chedule I: Your Inc					MM / DD/ YY	/ΥΥ		12/15
sup <sub> </sub> spo atta	is complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. One of the complex terms of the complex t	are married and not filing w	ng jointly, and your sp ith you, do not include	ouse i: e inforn	s livi: natio	ng with you, inclu n about your spo	de infor use. If m	mation about y ore space is n	/our eeded,
1.	Fill in your employment		Debtor 1			Debtor 2	or non-	filing spouse	
	information.  If you have more than one job, attach a separate page with information about additional		☐ Employed	<b>■</b> Emplo					
		Employment status	■ Not employed		☐ Not e				
	employers.	Occupation			Attorney				
	Include part-time, seasonal, or self-employed work.	Employer's name				Generat	ion Lav	w Ltd.	
	Occupation may include student or homemaker, if it applies.	may include student Employer's address			747 N. Church Road Elmhurst, IL 60126				
		How long employed t	here?			4	Years		
Pai	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to rep	oort for	any li	ne, write \$0 in the	space. li	nclude your non	-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	mplo	yers for that perso	n on the	lines below. If y	ou need
	, , , , ,					For Debtor 1		ebtor 2 or iling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	7,469.58	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross income. Add fin	ne 2 + line 3.		4.	\$	0.00	\$	7,469.58	

# Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 29 of 42

Deb	tor 1	Martha Kugelberg		Case numl	ber (if known)			
				For Deb	otor 1	For Debto		
	Cop	y line 4 here	4.	\$	0.00		7,469.58	
5.	List	all payroll deductions:						
٠.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	1,293.91	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5đ.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify: PXUME EE PRE	5h.+	• \$		+ \$	54.17	
		TO-PIA MED EE		\$	0.00	\$	1,023.66	
6.	Add	the payroli deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	2,371.74	
7.	Calc	sulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	5,097.84	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	- \$	0.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
10	Calc	culate monthly income. Add line 7 + line 9.	10. \$		0.00 + \$	E 007 0	4 = ¢	E 007 04
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. <b>U</b>		0.00	5,097.8	* Y	5,097.84
11.	State Inclu	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your refriends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not a	depen availat	ole to pay e	expenses list	ed in Sched	ule J.	0.00
12.	Add Write appli	the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certain ies	ult is tl n Liabi	ne combine ilities and l	ed monthly ir Related <i>Data</i>	, if it	2. \$	5,097.84
							Combin	ned
13.	Do y	ou expect an increase or decrease within the year after you file this form? No.					monthly	/ income
		Yes. Explain:						

Filli	n this information to identify your case:					
Debt	or 1 Martha Kugelberg				if this is: In amended filing	
Debt	or 2 use, if filing)				supplement showi 3 expenses as of th	ng postpetition chapter ne following date:
Unite	ed States Bankruptcy Court for the: NORTI	HERN DISTRICT OF ILLIN	OIS	Ĭ.	MM / DD / YYYY	
	e number					
(lf kn	nown)					
Of	ficial Form 106J					
	chedule J: Your Expe	neae				12/15
Be a	as complete and accurate as possible immation. If more space is needed, attraction (if known). Answer every question	e. If two married people ar ach another sheet to this	e filing together, be form. On the top of	oth are equa any additio	lly responsible for nal pages, write yo	supplying correct
Part	Describe Your Household Is this a joint case?					
	No. Go to line 2.					
	Yes. Does Debtor 2 live in a sepa	rate household?				
	☐ No ☐ Yes. Debtor 2 must file Offic	cial Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debt	or 2.	
2.	Do you have dependents? ☐ No					
	Do not list Debtor 1 and Debtor 2.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto	r 2	Dependent's age	Does dependent live with you?
	Do not state the				paragraphical construction of the section	□ No
	dependents names.		Child		6	Yes
						□ No
			Child		9	Yes
					40	□ No
			Husband		46	Yes
						□ No
2	Da varus armamana includo	<b></b>				☐ Yes
3.	avanage of agonla other than	No -				
	yourself and your dependents?	□ Yes				
Est	Estimate Your Ongoing Month imate your expenses as of your bank benses as of a date after the bankrupt blicable date.	ruptcy filing date unless v	you are using this to plemental Schedule	form as a su e <i>J</i> , check th	pplement in a Cha e box at the top o	pter 13 case to report f the form and fill in the
the	lude expenses paid for with non-cash value of such assistance and have ir ficial Form 106I.)	n government assistance ncluded it on <i>Schedule I:</i>	if you know Your Income	V0.00688	Your expe	enses
					occus un consulta fragmente di unha consulta e e en di esta CO	one conserved to the Copy products who exist the behind the
4.	The rental or home ownership expe payments and any rent for the ground		Include first mortgag	je 4. \$		2,683.52
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4b. Property, homeowner's, or rente			45. \$		0.00
	4c. Home maintenance, repair, and	• •		4c. \$ 4d. \$	and the second contract the second contract of the second contract o	100.00 66.00
5.	4d. Homeowner's association or co Additional mortgage payments for y		ome equity loans	40. s		0.00
٠.		, ,				

			n)
Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	150.00
6b. Water, sewer, garbage collection	6b.	\$	35.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
6d. Other. Specify:	6d.	\$	0.00
Food and housekeeping supplies	7.	\$	724.00
Childcare and children's education costs	8.	\$	50.00
Clothing, laundry, and dry cleaning	9.	\$	50.00
Personal care products and services	10.		50.00
Medical and dental expenses	11.		100.00
Transportation. Include gas, maintenance, bus or train fare.			
Do not include car payments.	12.	\$	300.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
Charitable contributions and religious donations	14.	\$	0.00
Insurance.			
Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a.	\$	76.00
15b. Health insurance	15b.	\$	0.00
15c. Vehicle insurance	15c.	\$	100,00
15d. Other insurance. Specify:	15d.		0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specify:	16.	\$	0.00
Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	0.00
17b. Car payments for Vehicle 2	17b.	\$	0.00
17c. Other, Specify:	17c.	\$	0.00
17d. Other. Specify:	17d.	\$	0.00
Your payments of alimony, maintenance, and support that you did not report as			· · · · · · · · · · · · · · · · · · ·
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
Other payments you make to support others who do not live with you.		\$	0.00
Specify:	19.		
Other real property expenses not included in lines 4 or 5 of this form or on Schedule	le I: Yo	our Income	e.
20a. Mortgages on other property	20a.	\$	0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's association or condominium dues	20e.	\$	0.00
Other: Specify:	21.	+\$	0.00
		;	0.00
Calculate your monthly expenses		_	
22a. Add lines 4 through 21.		\$	4,734.52
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add line 22a and 22b. The result is your monthly expenses.		\$	4,734.52
Calculate your monthly net income.			
	00		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.		5,097.84
23b. Copy your monthly expenses from line 22c above.	23b.	-\$	4,734.52
22a Cubtoot your monthly annual form		,	
23c. Subtract your monthly expenses from your monthly income.  The result is your monthly net income.	23c.	: \$	363.32
the result is your <i>monthly net income</i> .	۵. ا	: 🕶	
Do you suggest on increase and conservation	ile this	form?	ingrange or decrease because of
Do you expect an increase or decrease in your expenses within the year after you fi For example, do you expect to finish paying for your car loan within the year or do you expect your mor modification to the terms of your mortgage?  No.	rtgage p	payment to i	increase of decrease because of

# Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 32 of 42

Fill in this inform	nation to identify your c				
Debtor 1	Martha Kugelberg	Colyme (Come	Cast Maco		
Debtor 2	Prog Name	Majoret Platine	; switsene		
United States Ba	nkruptcy Court for the	MORRHARD DESCRICT	OF IELICIONS		
Case number					Check if this is an amended filing
Official Form	n 106Dec ion About a	n Individual	Debtor's Schedu	les	12/15
You must file this obtaining money years, or both. 1	- 4 61	e bankruptcy schedules connection with a ban	nsible for supplying correct informs s or amended schedules. Making a kruptcy case can result in fines up	false statement, cor	ncealing property, or risonment for up to 20
Did you pa	y or agree to pay some	one who is NOT an atto	mey to help you fill out bankruptcy	y forms?	•
<b>™</b> No					
Yes. 1	Name of person				etition Preparer's Notice, pature (Official Form 119)
	ulty of perjury, I declare te true and correct.	that I have read the sur	netary $x_0 \in \mathbb{R}^{n} \times \mathbb{R}^{n}$ with this	s declaration and	
× ∭∭ Marth	Kugelberg		X Signature of Debtor 2		
Date	图图10		Date		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

Software Copyright to 1506-2016 Burst Case (116) www.finetcase.com

Fill in	this informa	ation to identify your	case:			
Debtor	· 1	Martha Kugelber	g Middle Name	Last Name		
Debtor (Spouse		First Name	Middle Name	Last Name		
United	States Bani	kruptcy Court for the:	NORTHERN DISTRICT OF	FILLINOIS		
Case r (if knowr	number 				;	Check if this is an amended filing
	cial For				No	
Be as o	complete an	d accurate as possil	attach a separate sheet to t	e filing together, both are	e equally responsible for sup y additional pages, write yo	4/16 oplying correct ur name and case
Part 1	Give De	tails About Your Ma	rital Status and Where You	Lived Before	and the second second	
1. W	hat is your	current marital statu	s?			
	Married Not marri	ed				
2. Di	uring the las	st 3 years, have you	ived anywhere other than w	here you live now?		
	l No l Yes. List	all of the places you li	ved in the last 3 years. Do no	t include where you live no	N.	
D	ebtor 1 Prid	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
3. W states a	ithin the las and territorie	it 8 years, did you ev s include Arizona, Cal	er live with a spouse or legi ifornia, Idaho, Louisiana, Nev	al equivalent in a commu ada, New Mexico, Puerto F	nity property state or territor Rico, Texas, Washington and \	y? (Community property Visconsin.)
	l No					
	Yes. Mak	e sure you fill out Sch	edule H: Your Codebtors (Off	icial Form 106H).		
Part 2	Explain	the Sources of You	Income			
Fil	ll in the total	amount of income you	iployment or from operating I received from all jobs and al have income that you receive	I businesses, including par		ndar years?
		n the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		f current year until for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$49,231.75
			☐ Operating a business		☐ Operating a business	
		4		and the second second second second		

Official Form 107

Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 34 of 42

Debtor 1 Martha Kugelberg			lberg		Case number (if known)				
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Debtor 2 Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
		ndar year: December 3	31, 2015)	☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$77,341.00		
				☐ Operating a business		☐ Operating a business			
				☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	\$9,550.00		
				☐ Operating a business		Operating a business			
		ndar year bef December 3		☐ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$74,563.00		
				☐ Operating a business		☐ Operating a business			
				☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	\$5,400.00		
				☐ Operating a business		Operating a business			
	□ No ■ Yes.	. Fill in the de	tails.	,	·	·			
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)		
Fro the	m Januar date you	y 1 of curren filed for ban	t year until kruptcy:	N/A	\$0.00				
		ndar year: December 3	31, 2015 )	N/A	\$0.00				
		ndar year bef December 3		N/A	\$0.00				
Par	t 3t Lie	t Cortain Pa	imonte Vois	Made Before You Filed for	Pontruntov				
			,						
6.	☐ No.	Neither De	btor 1 nor D	's debts primarily consume Debtor 2 has primarily cons personal, family, or househo	umer debts. Consumer debt	s are defined in 11 U.S.C. § 1	01(8) as "incurred by an		
			•		fid you pay any creditor a tota	l of \$6,425* or more?			
		□ No.	Go to line 7		/   / )		41 4-4-1		
		☐ Yes * Subject t	paid that cr not include	editor. Do not include payme payments to an attorney for	nts for domestic support obliq	in one or more payments and pations, such as child support or after the date of adjustmer	and alimony. Also, do		

Page 35 of 42 Document Case number (if known) Debtor 1 Martha Kugelberg Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ■ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Amount you Was this payment for ... Creditor's Name and Address **Total amount** paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. ■ No Yes. List all payments to an insider. Total amount Amount you Reason for this payment Insider's Name and Address Dates of payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Total amount Amount you Reason for this payment Dates of payment Include creditor's name paid still owe Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Status of the case Case title Nature of the case Court or agency Case number Discover Bank vs. Martha L. Law Medium Circuit Court of Kendall Pending Kugelberg County On appeal 2016-LM-000178 807 West John Street ☐ Concluded Yorkville, IL 60560 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. П **Creditor Name and Address** Value of the Describe the Property Date property Explain what happened

Filed 08/30/16 Entered 08/30/16 22:48:07

Case 16-27892

Doc 1

Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 36 of 42

ver	otor 1 Martha Kugelberg	Case number	(if known)	
1.	Within 90 days before you filed for bank accounts or refuse to make a payment b	ruptcy, did any creditor, including a bank or financial in secause you owed a debt?	stitution, set off any a	mounts from your
	☐ Yes. Fill in the details.			
	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
12.	court-appointed receiver, a custodian, o	uptcy, was any of your property in the possession of an or another official?	assignee for the bene	fit of creditors, a
	■ No □ Yes			
Par	rt 5: List Certain Gifts and Contribution	ns		
13.	Within 2 years before you filed for banks  No  Yes. Fill in the details for each gift.	ruptcy, did you give any gifts with a total value of more t	than \$600 per person'	?
	Gifts with a total value of more than \$60 per person	00 Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:	ı		
14.	Within 2 years before you filed for banks ■ No □ Yes. Fill in the details for each gift or or	ruptcy, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo	total Describe what you contributed	Dates you contributed	Value
Pal	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankru or gambling?	uptcy or since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	■ No □ Yes. Fill in the details.			
		Describe and income anyone for the top	Data of your	Value of property
	Describe the property you lost and how the loss occurred	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	lost
Pai	rt 7: List Certain Payments or Transfer	rs		
16.	consulted about seeking bankruptcy or	uptcy, did you or anyone else acting on your behalf pay preparing a bankruptcy petition? preparers, or credit counseling agencies for services require		rty to anyone you
	<ul><li>□ No</li><li>■ Yes, Fill in the details.</li></ul>			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Law Office of John Graf 175 E. Hawthorn Parkway Suite 158 Vernon Hills, IL 60061	Attorney Fees	2016	\$1,500.00

Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 37 of 42

Deb	otor 1	Martha Kugelberg		Case	number (if known)	
	Addı Ema	on Who Was Paid ress il or website address on Who Made the Payment, if Not Yo	transferred	value of any property	Date payment or transfer was made	Amount of payment
	Acc	ess Counseling Inc.	Credit Counse	ling Fee	2016	\$25.00
17.	prom	n 1 year before you filed for bankrup ised to help you deal with your cred of include any payment or transfer that	itors or to make paymen		alf pay or transfer any prope	rty to anyone who
	<b>II</b>	No				
		Yes, Fill in the details.				
	Pers Addı	on Who Was Paid ress	Description and transferred	value of any property	Date payment or transfer was made	Amount of payment
18.	transi Includ	n 2 years before you filed for bankru ferred in the ordinary course of you le both outright transfers and transfers le gifts and transfers that you have alre	r business or financial af made as security (such as	fairs? the granting of a securi		
		No				
		Yes, Fill in the details,				
	Pers Addı	on Who Received Transfer ress	Description and property transfe	rred pa	escribe any property or ayments received or debts aid in exchange	Date transfer was made
	Pers	on's relationship to you		•	v	
19.		n 10 years before you filed for bankr ficiary? (These are often called asset-		ny property to a self-s	ettled trust or similar device	of which you are a
	<b>III</b>	No				
		Yes. Fill in the details.				
	Nam	e of trust	Description and	value of the property t	transferred	Date Transfer was made
Par	t 8:	List of Certain Financial Accounts,	Instruments, Safe Depos	it Boxes, and Storage	Units	
20.		n 1 year before you filed for bankrup moved, or transferred?	otcy, were any financial a	ccounts or instrument	ts held in your name, or for y	our benefit, closed,
	house	de checking, savings, money market es, pension funds, cooperatives, ass			posit; shares in banks, credi	t unions, brokerage
		No Yes, Fill in the details.				
		e of Financial Institution and ress (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.		ou now have, or did you have within or other valuables?	1 year before you filed fo	or bankruptcy, any saf	e deposit box or other depos	itory for securities,
		No				
		Yes. Fill in the details,				
		e of Financial Institution ress (Number, Street, City, State and ZIP Code)	Who eise had ac Address (Number, State and ZIP Code)		ribe the contents	Do you still have it?

Entered 08/30/16 22:48:07 Case 16-27892 Doc 1 Filed 08/30/16 Desc Main Document Page 38 of 42 Case number (if known) Deptor 1 Martha Kugelberg 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Describe the contents Name of Storage Facility Who else has or had access have it? Address (Number, Street, City, State and ZIP Code) to it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. ■ No Yes. Fill in the details. Value **Owner's Name** Where is the property? Describe the property (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Environmental law, if you Date of notice Name of site Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

Address (Number, Street, City,

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time

State and ZIP Code

☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)

Official Form 107

	Case 16-27892	Doc 1	Filed 08/30/16 Document	Entered 08 Page 39 of		2:48:07	Desc Main
Debtor	<sup>1</sup> Martha Kugelberg			C	ase number (	f known)	
	☐ A partner in a partners	hip					
	An officer, director, or	managing ex	recutive of a corporatio	n			
	☐ An owner of at least 5%	% of the votir	ng or equity securities o	of a corporation			
	No. None of the above ap	plies. Go to	Part 12.				
	Yes. Check all that apply	above and fil	I in the details below fo	r each business.			
Ad	isiness Name Idress imber, Street, City, State and ZIP Co	do)	Describe the nature of			r Identification clude Social S	n number Security number or ITIN.
(IVU	mper, Street, Chy, State and Zir Co.	uej	Name of accountant	ог вооккеерег	Dates bu	siness existed	ti di
	uilt For Learning		Literacy Education		EIN:	N/A	
O:	12 Hunt Club Ct. swego, IL 60543		N/A		From-To		
28. Wit	hin 2 years before you filed titutions, creditors, or other No Yes. Fill in the details belo	r parties.	tcy, did you give a final	ncial statement to a	anyone abou	it your busine	ss? Include all financial
Ac	ime idress imber, Street, City, State and ZIP Co	de)	Date Issued				

Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 40 of 42

Fill in this inform	nation to identify your case:		
Debtor 1	Martha Kugelberg First Name Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name Middle Name	Last Name	
United States Bar	nkruptcy Court for the: NORTHERN DIS	TRICT OF ILLINOIS	
Case number (if known)			☐ Check if this is an amended filing
Official Fo		iduals Filing Under Chaptور	er 7 12/15
	vidual filing under chapter 7, you must fi claims secured by your property, or	Il out this form if:	
you have lease	ed personal property and the lease has r s form with the court within 30 days after ver is earlier, unless the court extends th	not expired. ryou file your bankruptcy petition or by the date so ne time for cause. You must also send copies to th	et for the meeting of creditors, e creditors and lessors you list
	ople are filing together in a joint case, bo d date the form.	oth are equally responsible for supplying correct in	nformation. Both debtors must
	and accurate as possible. If more space i our name and case number (if known).	s needed, attach a separate sheet to this form. On	the top of any additional pages,
Part 1: List Yo	our Creditors Who Have Secured Claims		
		D: Creditors Who Have Claims Secured by Property	y (Official Form 106D), fill in the
information be identify the cre	low. ditor and the property that is collateral	What do you intend to do with the property tha secures a debt?	t Did you claim the property as exempt on Schedule C?
Creditor's <b>S</b> i	hellpoint Mortgage	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
	Single Family Home	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt:		☐ Retain the property and [explain]:	w 400
For any unexpire in the information	n below. Do not list real estate leases. Ur	I in Schedule G: Executory Contracts and Unexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)	ne lease period has not yet ended.
Describe your u	nexpired personal property leases		Will the lease be assumed?
Lessor's name: Description of lea	sed		□ No
Property:			☐ Yes
Lessor's name: Description of lea	sed		□ No
Property:			☐ Yes
Lessor's name:			□ No
Official Form 108	Statement of li	ntention for Individuals Filing Under Chapter 7	page 1

## Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main Document Page 41 of 42

Debror : Martina Kugelberg	Case number (*Anna*)				
Description of leased Property	☐ Yes				
Lessor's name Description of leased Property	□ No □ Yes				
Lessor's name Description of leased Property	□ No □ Yes				
Lessor's name Description of leased Property	□ No □ Yes				
Lessor's name. Description of leased Property	□ No				
Part 3: Sign Below  Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.					
X Martha Kugelberg Signature of Debtor 1  Date S 28	onstore of Debtor 2				

and the second s

B2030 (Form 2030) (12/15)

Case 16-27892 Doc 1 Filed 08/30/16 Entered 08/30/16 22:48:07 Desc Main

Page 42 of 42 Document

### United States Bankruptcy Court Northern District of Illinois

	1401	them District or Inmois			
In r	e Martha Kugelberg		Case N		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	NEY FOR I	DEBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy, o	or agreed to be pa	iid to me, for services rer	ndered or to
	For legal services, I have agreed to accept		\$	1,500.00	
	Prior to the filing of this statement I have received		\$	1,500.00	
	Balance Due			0.00	
2. ′	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other person t	nless they are m	embers and associates of	my law firm.
	☐ I have agreed to share the above-disclosed compensations of the agreement, together with a list of the nan				w firm. A
5.	In return for the above-disclosed fee, I have agreed to re-	nder legal service for all aspects	of the bankrupto	y case, including:	
	<ul> <li>a. Analysis of the debtor's financial situation, and rende</li> <li>b. Preparation and filing of any petition, schedules, state</li> <li>c. Representation of the debtor at the meeting of credito</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and application</li> <li>522(f)(2)(A) for avoidance of liens on hour</li> </ul>	ement of affairs and plan which ors and confirmation hearing, and educe to market value; exe ns as needed; preparation	may be required; d any adjourned l mption plannii	nearings thereof;	ling of
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.	does not include the following chargeability actions, judic	service: ial lien avoida	nces, relief from stay	actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any bankruptey proceeding.	John Graf  John Graf  Signature of Attorney Law Office of Joh 175 E. Hawthorn F Suite 158  Vernon Hills, IL 60 847-996-1180 Fax attorneyjohngraf@ Name of law firm	, n Graf Parkway 0061 c: 847-739-720		ebtor(s) in